Important Advances in Clinical Medicine

Epitomes of Progress -- Allergy

The Scientific Board of the California Medical Association presents the following inventory of items of progress in Allergy. Each item, in the judgment of a panel of knowledgeable physicians, has recently become reasonably firmly established, both as to scientific fact and important clinical significance. The items are presented in simple epitome and an authoritative reference, both to the item itself and to the subject as a whole, is generally given for those who may be unfamiliar with a particular item. The purpose is to assist the busy practitioner, student, research worker or scholar to stay abreast of these items of progress in Allergy which have recently achieved a substantial degree of authoritative acceptance, whether in his own field of special interest or another.

The items of progress listed below were selected by the Advisory Panel to the Section on Allergy of the California Medical Association and the summaries were prepared under its direction.

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Lung Disease from Contaminated Air Coolers

HYPERSENSITIVITY ALVEOLITIS (HA) is a potentially fatal immunological reaction in the alveoli and alveolar ducts resulting from the inhalation of organic dusts by a person already sensitized by previous, usually prolonged and heavy exposure to the dust. It has been postulated that everyone is susceptible in much the same way that serum

sickness can be induced in anyone, although the amount of antigen necessary to trigger the reaction varies greatly among individuals. The disease has been most often related to occupational exposure to organic dusts as, for example, in farmers (exposed to moldy hay), mushroom workers, sugar can processors, pigeon breeders, and the like.

Symptoms vary from mild or severe "flu" syndrome with cough, chest pain, fever, chills, and myalgias, to severe pulmonary decompensation with dyspnea secondary to restrictive disease and diffusion defects. Vital capacity is decreased and wheezing is an inconstant feature. Interstitial pneumonitis and diffuse nodular infiltrates are seen in chest x-ray films. Serum obtained during the active process contains precipitating antibodies to the offending agent, and latex fixation